FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000055376

1. Corporation Name

KIYOSHI'S, INC.

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90041 010 ***150.00



Principal Place	of Business	Mailing Address								ı
3666 DORST LA	3666 DORST LANE	r Lane							i	
SARASOTA FL 3		SARASOTA FL 34238				DO NOT WRITE IN THIS SPACE				1
							I HIS SI AC	,E)
						3. Date Incorporated or Qualifed				. !
		· · · · · · · · · · · · · · · · · · ·				06/22/1998 4. FEI Number		1	lied For	
2. Principal Pla	2a. Mailing Address	ng Address			65-084608	≀ ⊂ ⊦	_			
21		26				62 00 1600			Applicable	
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.				=6=Certifcate of Status Desired		ee Rec	dditional	<u></u>
22		City & Chate				<u> </u>				
City & State	•	City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees				
23		28 Country				Trust Fund Contribution			1 663	١.
Zip	Country			Country		8. This corporation owes the current ye	ar Intangibi Ye⊟		□No	
24	25	29	30	1		Personal Property Tax.				١,
Name and Address of Current Registered Agent					Name	10. Name and Address of New Regist	aleu Agein			
POWAMAN DAVID C. ID				81	Name		•			
BOWMAN, DAVID G JR.				82 Street Address (P.O. Box Number is Not Acceptable)						'
	OUTH TUTTLE AVENUE									
SUIT			8:							
SAHA	ASOTA FL 34237			84	City		85	Zip C	ode	
					•		FL			}
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the a	bove-	named corpo	ration submits this statement for the purpo	se of chang	jing its r	egistered	ĺ
h office or re	egistered agent, or both, in the State on familiar with, and accept the obligation	st Florida. Such change was a	ilithorize	a ov in	ne corporation	n's board of directors. I hereby accept the	арропшинен	t as reg	Bioroa	
-	in landing. With, and dooopt the congest									
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registere	d Agent s	signature required	when reinstating) DA	TE] á
12.	OFFICERS ANI	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICER				2
TITLE	D	☐ DELETE	1.1 T	MLE			<u> </u>	hange	☐ Addition	🗄
NAME	NORO, KIYOSHI	1.2 N		IAME						ج
STREET ADDRESS	3666 DORST LANE	1.3 \$		TREETA	UDDRESS					ដែ
CITY-ST-ZIP	SARASOTA FL 34238	1.4 C		ITY-ST-	ZIP				- · ·] &
TITLE	D	☐ DELETE	2.1 T					hange	☐ Addition	۱
NAME	NORO, AIKO		22 N	IAME						
STREET ADORESS	3666 DORST LANE		~=8×==		VDDRESS		<u> </u>			==
1	SARASOTA FL 34238			CITY-ST-						l
CITY-ST-ZIP	SANASOTA FE 34250	☐ DELETE	3.1 T		2.11			hange	☐ Addition	1
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NAME					DODECC				•	
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TITLE] <u> </u>
NAME:				NAME	l					1
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NAME				IAME		•				ļ.
STREET ADDRESS					ADDRESS				1.2	֓֞֞֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
CITY-ST-ZIP				TTY-ST-	ZIP					
TITLE		☐ DELETE	6.1 T	TTLE	-			hange	☐ Addition	}
NAME			6.2 N	IAME						
STREET ADDRESS			6.3 9	STREET A	ADORESS					
CITY-ST-ZIP			6.4 0	CITY-ST-	ZIP					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.